

MOTION FOR CONTEMPTJD-FM-173 Rev. 2-2001
C.G.S. § 46b-87 § 46b-220 P.B. § 25-27STATE OF CONNECTICUT
SUPERIOR COURT

COURT USE ONLY

MFCONTP

(Check one) ☐ Before Judgment (pendente lite) ☐ After Judgment

JUDICIAL DISTRICT OF	AT (Town)	DOCKET NO.
PLAINTIFF'S NAME (Last, First, Middle Initial)	DEFENDANT'S NAME (Last, First, Middle Initial)	
PLAINTIFF'S ADDRESS (No., street, city, state, zip code)	DEFENDANT'S ADDRESS (No., street, city, state, zip code)	

I, the ☐ PLAINTIFF ☐ DEFENDANT, respectfully represent that this Court issued an order on _____
(month, day, year)
directing the ☐ plaintiff ☐ defendant to (complete only the information below that applies to the order(s)
you claim was/were disobeyed):

PAY CHILD SUPPORT IN THE AMOUNT OF per	PAY ALIMONY IN THE AMOUNT OF per	TOTAL BALANCE OWED	AS OF (Date)
HAVE VISITATION OR PARENTING TIME AS FOLLOWS: (Attach a copy of the visitation schedule if available)			
PAY MEDICAL BILLS OR PROVIDE HEALTH INSURANCE AS FOLLOWS			
OTHER: _____ _____ _____			

The ☐ plaintiff or ☐ defendant has disobeyed the court order in the following ways: (Please be specific. Include the amount of any arrears claimed due as of the date of this motion or a date specifically identified.)

I ask the Court to find the ☐ plaintiff ☐ defendant in contempt. I certify that the above information is true to the best of my knowledge.

SIGNATURE*	DATE	TELEPHONE (Area Code first)
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CERTIFICATION (Complete if motion is filed before judgment (pendente lite))

I certify that I mailed/delivered a copy of this motion to:	NAME**	DATE MAILED/DELIVERED
ADDRESS (No., street, city, state, zip code)		

SIGNATURE	PRINT NAME	DATE SIGNED
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**If necessary, attach additional sheet with name of each party served and the address at which service was made.

ORDER TO ATTEND HEARING AND NOTICE (TO BE COMPLETED BY THE COURT)

The court orders ☐ the plaintiff ☐ the defendant to attend a hearing at the time and place shown below to show why you are not in contempt. The Court also orders the ☐ plaintiff ☐ the defendant to give notice to the opposing party of the Motion and of the time and place where the Court will hear it, by having a true and attested copy of the Motion and this Order served on the opposing party by any proper officer at least **12 days** before the date of the hearing. Proof of service shall be made to this Court at least **six days** before the hearing.

BY THE COURT (Judge/Assistant Clerk)	DATE SIGNED		
HEARING TO BE HELD AT →	SUPERIOR COURT, JUDICIAL DISTRICT OF	DATE	TIME
	COURT ADDRESS	ROOM NO. (If known)	TELEPHONE (Area code first)

If you do not attend the court hearing, a civil arrest order (capias) may be issued against you.

(Continued on back/page 2)

*Check appropriate court: ☐ Superior Court ☐ Family Support Magistrate Division

SUMMONS

TO ANY PROPER OFFICER:

By the Authority of the State of Connecticut, you must serve a true and attested copy of the above Motion and Order to Attend Hearing on the below named person in one of the ways required by law at least **12 days** before the date of the hearing, and file proof of service with this Court at least **six days** before the hearing.

PERSON TO BE SERVED	ADDRESS
ASSISTANT CLERK	DATE SIGNED

ORDER

The Court has heard the above Motion and finds that the ☐ plaintiff ☐ defendant:

☐ is not in contempt. ☐ is in contempt in the following way(s):

☐ owes arrears as of _____ in the amount of _____.

☐ other (specify): _____

IT IS ORDERED:

☐ payment in the amount of _____ for current support and _____ on arrears by (date) _____.

☐ income withholding in the amount of _____.

☐ suspension of professional, occupational, recreational, or driver's license with a 30-day stay (attach "License Suspension Order," Form JD-FM-153)

☐ posting of a surety bond

☐ incarceration

☐ attorney's fees

☐ marshal's fees

☐ this matter is continued to _____ (date) at _____ (time).

☐ other (specify): _____

BY THE COURT (Judge/FSM)	SIGNED (Assistant Clerk)	DATE OF ORDER
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RETURN OF SERVICE

I left a true and attested copy of the Motion for Contempt ☐ personally with the defendant ☐ personally with the plaintiff

☐ at the current home of the ☐ defendant or ☐ plaintiff at _____
(Number, street, town or city)

The original Motion is attached.

NAME AND TITLE	COUNTY	DATE OF SERVICE
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MARSHAL'S USE ONLY

FEE INFORMATION:

COPY _____
ENDORSEMENT _____
SERVICE _____
TRAVEL _____
TOTAL _____